

UNITED STATES DEPARTMENT OF AGRICULTURE  
AGRICULTURAL RESEARCH SERVICE  
OFFICE OF SCIENTIFIC QUALITY REVIEW

Form Approved:  
OMB No. 0518-0028  
Expiration Date: 09/30/2003

## AD HOC PEER REVIEW OF ARS RESEARCH PROJECT

*The purpose of this review is to judge the technical merit of the planned research and to make constructive comments for improvement. The principle focus of this research has been determined by ARS to be essential to its mission, and funding has been approved at the planned level. Please provide both qualitative ratings and comments on each review criteria.*

Project Title

National Program

Date

Lead Scientist

Reviewer Identification Number

**1. Merit and Significance:** Are the project objectives relevant to the stated research goals and directions of the corresponding National Program? Will the successful completion of the project enhance knowledge of a scientifically important problem? Will the project lead to the development of new knowledge and technology? Are you aware of any other data/studies relevant to this research effort? If applied research, comment on the value of the research to its customers.

Project Title	
National Program	Date
Lead Scientist	Reviewer Identification Number

**2. Adequacy of Approach and Procedures:** Are the hypotheses and/or plan of work well conceived? Are the experiments, analytical methods, and approaches and procedures appropriate and sufficient to accomplish the objectives? How could the approach or research procedures be improved?

Project Title	
National Program	Date
Lead Scientist	Reviewer Identification Number

**3. Probability of Successfully Accomplishing the Project's Objectives:** What is the probability of success in light of the investigator or project team's training, research experience, preliminary data if available, and past accomplishments? Are the objectives both feasible and realistic within the stated timeframe and with the resources proposed? Do the investigators have an adequate knowledge of the literature as it relates to the proposed research?

Project Title	Reviewer Identification Number	Date
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**Additional Comments or Suggestions:**

**For Ad-Hoc Reviews, please complete this section prior to returning Peer Review to the OSQR.**

**Overall Project Evaluation**

<input type="radio"/> No Revision Required	<input type="radio"/> Minor Revision Required	<input type="radio"/> Moderate Revision Required	<input type="radio"/> Major Revision Required	<input type="radio"/> Not Feasible
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**PUBLIC BURDEN STATEMENT:** According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0518-0028. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Project Title

Reviewer Identification Number

Date

1. Merit and Significance *(continued)*

Project Title	Reviewer Identification Number	Date
<b>2. Adequacy of Approach and Procedures</b> <i>(continued)</i>		

